Foster Family Home - Corrective Action Report

Provider ID:

1-587438

Home Name:

Jojie Filburn, CNA

Review ID: 1-587438-7

1486 Kohou Street

Reviewer:

Maribel Nakamine

Honolulu

HI 96817

Begin Date:

9/29/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

Home inspection for a 3 person CCFFH recertification completed.

Corrective Action Report issued during home inspection with all items due to CTA by 10/29/2020.

6.(d)(1)- see applicable sections of the review

3 Person Fire Safety. **Natural Disaster**

3 Person Fire Safety

(3P) Fire

(3P)(b)(2) Fire

shall be held at different times of the day, evening, and night

Comment:

(3P)(b)(2)Fire- Monthly Fire Drill times for the months of 1/2020-9/2020 - times were recorded/done only on evening between 6:00pm-7:30pm.

Foster Family Home

Client Rights

[11-800-53]

53.(b)(9)

Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Client #1, Client #2, and Client #3's bedroom door knobs do not have a lock. Per the My Choice My Way, clients' door knobs should have a lock from the inside for client's privacy.

Foster Family Home

Records

[11-800-54]

54.(a)(1)

Emergency procedures and an evacuation map;

Comment:

54.(a)(1)- Evacuation Map does not include the upstairs of the CCFFH.

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9/29/2020 Date 9/29/20

Community Care Foster Family Home (CCFFH) Written Corrective Action Plan (CAP) Chapter 11-800

PCG's Name on CCFFH Certificate: Jojie Filburn

(PLEASE PRINT)

CCFFH Address: 1486 Kohou St. Honolulu, HI 96817

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
(3p)(b) (2)	Fire drill shall be conducted different times of the day, morning, evening and night.	10/5/ 2020	To comply with fire drill requirment which is morning, evening, and night. I will schedule the fire drills each month for different times of the day.
53(b)(9)	Client's door knob were changed to meet criteria of patient's privacy.	10/8/ 2020	To treat clients with understanding, respect, and full consideration of the client's dignity and individuality, in privacy in treatment and in care of the patient's personal needs. I will be familiar with the My Choice, My Way expectations.
54(a)(1)	Evacuation map was revised and added a map upstairs	10/8/20	Random evacuation drills shall be conducted so the all caregivers and household members would know where to go and what to do during emergency situations. I will review the requirements for fire safety and emergency preparedness to make sure I am following the requirements.

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All items that were fixed are attached to this CAP

PCG's Signature:

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